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CURRENT CORRESPONDENCE ADDRESS (Note; Use Block 1 for any change of address)				s) Transmittal. Thi rs. Each additional	s certific I naner.	tate cannot be used for such as an assignment	domestic mailings of the or any other accompanying at or formal drawing, must
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SUTHERLANI 999 PEACHTRE ATLANTA, GA	I her State addr trans	Certificate of Mailing or Transmission  I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO		NEY DOCKET NO.	CONFIRMATION NO.
09/540,011	1 03/31/2000		Peter J. Kight	239		23952-0051	2558
TITLE OF INVENTION	BILL PAYMENT SYS	STEM AND METHOD W	/ITH A MASTER MERCH	IANT DATABASI	3		
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	DISSUE FEE TOTAL FEE(S) DU		DATE DUE
nonprovisional	NO	\$1400	\$0	\$0		\$1400	07/12/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS	1			
GARG, YOGESH C		3625	705-040000				
1. Change of corresponde CFR 1.363).	nce address or indicatio	1	on the patent front page, list  Sutherland Asbill &				
	ondence address (or Cha	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  Brennan, LLP					
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent attorneys or agents. If no name is slisted, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	e)			
PLEASE NOTE: Unle recordation as set forth	ess an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the pa T a substitute for filing an	ntent. If an assigne	ee is ide	entified below, the do	ocument has been filed for
(A) NAME OF ASSIC		•	(B) RESIDENCE: (CITY		OUNTE	RY)	
CheckFree Corporation			Norcross, Georgia				
Please check the appropri	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual Co	rporatio	on or other private gro	up entity Government
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5. Change in Entity Stat	tus (from status indicate s SMALL ENTITY state	,	☐ b, Applicant is no lon	ger claiming SMAI	LL ENT	ITY status. See 37 CF	FR 1.27(g)(2).
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Authorized Signature				Date Ma	ıy 24	, 2007	
Typed or printed name		<u> </u>		Registration N		59,158	
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